# **Application Data Sheet**

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

<b>Application Information</b>	
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	0
Number of copies of CDs::	
Sequence submission?::	Yes (14 pages)
Computer Readable Form (CRF)?::	Yes
Number of copies of CRF::	1
Title::	COMPOSITIONS AND METHODS OF
THERAPY FOR CANCERS CHARACTE	RIZED BY EXPRESSION OF THE TUMOR-
ASSOCIATED ANTIGEN MN/CA IX	
Attorney Docket Number::	PP19155.002 (35784/267827)
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	1
Small Entity::	No
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	

No

**Applicant Information** 

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name:: Justin

Family Name:: Wong

Name Suffix::

City of Residence:: Oakland

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: 389 Somerset Road #3

City of mailing address:: Oakland

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94611

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name:: Jill

Family Name:: Winter

Name Suffix::

City of Residence:: Richmond

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: 435 Mount Street

City of mailing address:: Richmond

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94805

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name:: Guita

Family Name:: Lalehzadeh

Name Suffix::

City of Residence:: Oakland

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: 669 Hillsborough #23

City of mailing address:: Oakland

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94606

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name:: Robert

Family Name:: Warne

Name Suffix::

City of Residence:: San Leandro

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: 305 Melvin Court

City of mailing address:: San Leandro

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94577

#### **Correspondence Information**

Correspondence	Customer	Number
Correspondence	Customer	Number::

27476

**Representative Information** 

Representative Customer Number::

00826

### **Domestic Priority Information**

Application::	Continuity Type::	Provisional	Provisional Filing
		Application::	Date::
This Application	Utility	60/405,577	August 23, 2002
	Continuation of		

## **Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
			\$7.74
			1

### **Assignee Information**

Assignee name::

**Chiron Corporation** 

Street of mailing address::

4560 Horton Street

City of mailing address::

Emeryville

State or Province of mailing address::

CA

Country of mailing address::

US

Postal or Zip Code of mailing address::

94608

(If there is more than one assignee, repeat information for each one.)